



**CITY OF MORGAN HILL  
COMMUNITY AND CULTURAL CENTER  
FACILITY REQUEST APPLICATION**

Phone: 408-782-0008 Fax: 408-779-5450

Date/Time of Application: \_\_\_\_\_ Date/Time RCSD call back: \_\_\_\_\_

<b>Room/s Request:</b>  <input type="checkbox"/> Hiram Morgan Hill with <input type="checkbox"/> Rose Garden <input type="checkbox"/> El Toro <input type="checkbox"/> Amphitheater  <input type="checkbox"/> CCC: (entire facility)  <input type="checkbox"/> Children's Pavilion <input type="checkbox"/> Diana Murphy <input type="checkbox"/> Machado Room <input type="checkbox"/> Madrone Room <input type="checkbox"/> Mira Monte Dance Room <input type="checkbox"/> Playhouse <input type="checkbox"/> CRC Mtg. Room	<b>User Group:</b> <input type="checkbox"/> Non-Profit/Community Group <input type="checkbox"/> M.H. Resident/Business <input type="checkbox"/> Standard  <b>Applicant's Name:</b> _____ <b>Organization (if applicable):</b> _____ <b>Address:</b> _____ <b>City:</b> _____ <b>Zip:</b> _____ <b>(Day Telephone #):</b> _____ <b>(Evening telephone #):</b> _____ <b>E-Mail:</b> _____ <b>FAX #:</b> _____ <b>Alternate Contact:</b> _____ <b>Telephone:</b> _____ <b>Address:</b> _____ <b>City:</b> _____ <b>Zip:</b> _____ <b>E-Mail:</b> _____ <b>FAX #:</b> _____ <b>Type of Event:</b> _____ <b># of Guests (this includes children):</b> _____ <b>If a Birthday Party (what age is birthday person):</b> _____
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**Alcohol and/or dancing requires insurance and security guard(s). All reservations will share the building, kitchen, restrooms and parking lot with other events.**

**1<sup>st</sup>** Choice: Event Date: \_\_\_\_\_

**2<sup>nd</sup>** Choice: Event Date: \_\_\_\_\_

**Note:**

**SET-UP time, the CEREMONY, the EVENT, & CLEAN-UP time are ALL consecutive, BILLABLE hours. (The building can not be used after midnight for any purpose)**

Set-up Time: From: \_\_\_\_\_ To: \_\_\_\_\_

Meeting Time: From: \_\_\_\_\_ To: \_\_\_\_\_

Ceremony Time: From: \_\_\_\_\_ To: \_\_\_\_\_

Reception Time: From: \_\_\_\_\_ To: \_\_\_\_\_

Clean up Time: **(must begin 1 hour before your scheduled ending time on permit)**: From: \_\_\_\_\_ To: \_\_\_\_\_

Kitchen Use: ☐ Yes ☐ No Caterer: ☐ Yes ☐ No

Projector Rental (fee applies): ☐ Yes ☐ No

Event Open to Public? ☐ Yes ☐ No

Serving Food/Beverages? ☐ Yes ☐ No

Serving Alcoholic Beverages? ☐ Yes ☐ No

Dancing? ☐ Yes ☐ No

Musicians? ☐ Band ☐ DJ ☐ Karaoke

Amplified Music in Amphitheater? ☐ Yes ☐ No

**THESE ITEMS REQUIRE COUNTY PERMITS**

**Sale** of items to the public? ☐ Yes ☐ No

**Sale** of tickets to the public? ☐ Yes ☐ No

**Sale** of Alcoholic Beverages? ☐ Yes ☐ No

**Name of Meeting or Event:**

\_\_\_\_\_  
\_\_\_\_\_

**HOLD HARMLESS AND INDEMNIFICATION AGREEMENT**

USER agrees to abide by Community and Cultural Center policies and procedures. USER agrees to protect, defend and hold harmless CITY and its elective or appointive boards, officers, agents, and employees from any and all claims, liabilities, expenses, or damages of any nature, including attorneys' fees, for injury or death of any person, or damage to property, or interference with use of property, arising out of, or in any way connected with performance of the Agreement by USER, USER'S agents, officers, employees, subcontractors, or independent contractors hired by USER. The only exception to USER'S responsibility to protect, defend, and hold harmless CITY, is due to the sole negligence of CITY. This hold harmless agreement shall apply to all liability, regardless of whether any insurance policies are applicable. The policy limits do not act as a limitation upon the amount of indemnification to be provided by USER.

USER agrees to pay for additional required insurance coverage and City contracted licensed private security for the event if alcohol is being served or sold, dancing is taking place, or the City determines that additional insurance or security is needed.

I hereby represent that the information contained in this application and its attachments is true and correct and that I have the authority to make this application on behalf of myself or my group.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

This Application and its attachments serve as the Permit for the rooms checked above when approved by the City Official.

User must have this Permit present and available for inspection during event.